PROPERTY & CASUALTY INSURERS

COMPAN	Y NAMI	E:				NAIC Comp	oany Code:		
Contact:						_ Telephone: _			
REQUIRED FILINGS IN THE STATE OF:			<u>Arkansas</u>			Filings Made During the Year 2006			
(1) (2) Check- Line list #		(3) REQUIRED FILINGS	(4) NUMBER OF COPIES*		(5) DUE	(6) FORM SOURCE**	(7) Applicable Notes	For Internal DOI use Only	
		FOR THE ABOVE STATE	Do	omestic	Foreign	DATE			
Initial if Enclosed			State	NAIC	State				
		I. NAIC FINANCIAL STATEMENTS							
	1	Annual Statement (8 ½"x14") 1. ORIGINAL 2. DUPLICATE- MARKED "COPY"	2	1	0	3/1	NAIC	A, B, E, F, G, H, I, J, K, L,	
	1.1	Printed Investment Schedule detail (Pages E01-E25)	2	1	xxx	3/1	NAIC		t file a separate already included tatement.
	2	Quarterly Financial Statement (8 ½" x 14") 1. ORIGINAL 2. DUPLICATE- MARKED "COPY"	2	1	0	5/15, 8/15, 11/15	NAIC	FOREIGN: SEE L & M	
	3	Protected Cell Annual Statement	2	0	XXX	3/1	NAIC		
	4	Combined Annual Statement (8 ½" x 14")	0	1	0	5/1	NAIC		
		II. NAIC							
	10	SUPPLEMENTS	2	1	0	4/1	NAIC		
	10	Accident & Health Policy Experience Exhibit	2	1	0	4/1	NAIC		
	11	Combined Insurance Expense Exhibit	0	1	0	5/1	NAIC		
	12	Credit Insurance Experience Exhibit	2	1	XXX	4/1	NAIC		
	13	Financial Guaranty Insurance Exhibit	2	1	0	3/1	NAIC		
	14	Investment Risk Interrogatories	2	1	0	4/1	NAIC		
	15	Insurance Expense Exhibit	2	1	XXX	4/1	NAIC		
	16	Long Term Care Experience Reporting Forms	2	1	xxx	4/1	NAIC		
	17	Management Discussion & Analysis	2	1	0	4/1	Company		
	18	Medicare Supplement Insurance Experience Exhibit	2	1	xxx	3/1	NAIC		
	19	Premiums Attributed to Protected Cells Exhibit	2	1	0	3/1	NAIC		
	20	Reinsurance Attestation Supplement	2	1	XXX	3/1	Company		
	21	Reinsurance Summary Supplemental	2	1	XXX	3/1	NAIC		
	22	Risk-Based Capital	1	1	0	3/1	NAIC		

23	Schedule SIS	2	N/A	N/A	3/1	NAIC		
24	Statement of Actuarial	2	1	0	3/1	Company		
	Opinion							
25	Actuarial Opinion	2	XXX	XXX	3/15	Company		
	Summary							
26	Supplement A to	2	1	0	3/1,	NAIC		
	Schedule T				5/15			
					8/15,			
					11/15			
27	Supplemental	2	N/A	N/A	3/1	NAIC		
21	Compensation Exhibit	2	IV/A	1 \ / A	3/1	IVAIC		
20					0/1.5/1.5	NIATO		
28	Trusteed Surplus	2	1	XXX	3/1,5/15	NAIC		
	Statement				8/15,			
					11/15			
	III. ELECTRONIC					Foreign Comp		
	FILING	As lon	g as you file	electronicall	y with the N.	AIC, you are n	ot required to file	electronically
	REQUIREMENTS	with th	is state.		•	_		•
30	Annual Statement	XXX	1	XXX	3/1	NAIC		
	Electronic Filing	11111	*	AAA	<i>-</i> , <u>-</u> ,			
31	March .PDF Filing	vvv	1	VVV	3/1	NAIC		
		XXX		XXX NI/A				
32	Risk-Based Capital	XXX	1	N/A	3/1	NAIC		
	Electronic Filing							
33	Combined Annual	XXX	0	XXX	5/1	NAIC		
	Statement Electronic							
	Filing							
34	Combined Annual	XXX	0	XXX	5/1	NAIC		
	Statement .PDF Filing							
35	Supplemental Electronic	XXX	1	XXX	4/1	NAIC		
33	Filing	ΛΛΛ	1	AAA	7/1	MAIC		
26			1		4/1	NATO		
36	Supplemental .PDF Filing	XXX	1	XXX	4/1	NAIC		
37	Quarterly Electronic	XXX	1	XXX	5/15,	NAIC		
	Filing				8/15,			
					11/15			
38	Quarterly .PDF Filing	XXX	1	XXX	5/15,	NAIC		
					8/15,			
					11/15			
39	June .PDF Filing	XXX	1	XXX	6/1	NAIC		
	IV. AUDITED	12.2.2		11111	0,1	11110		
	FINANCIAL							
	STATEMENTS		NT/4	37/4				
51	Accountants Letter of	2	N/A	N/A		Company		
	Qualifications					1		
52	Audited Financial	2	1	0	6/1	Company		
	Statements							
53	Audited Financial	2	N/A	N/A		Company		
	Statements Exemption							
	Affidavit							
54	Independent CPA	2	N/A	N/A	1	Company	N	
	macpenaent Ci A		N/A	N/A	+	Company	11	
				IN/A	İ	Company		
55	Notification of Adverse	2	IN/A	1 1/1 1				
55	Notification of Adverse Financial Condition							
	Notification of Adverse Financial Condition Report of Significant	2	N/A	N/A		Company		
55	Notification of Adverse Financial Condition Report of Significant Deficiencies in Internal					Company		
55	Notification of Adverse Financial Condition Report of Significant					Company		
55	Notification of Adverse Financial Condition Report of Significant Deficiencies in Internal Controls	2					J	
55 56	Notification of Adverse Financial Condition Report of Significant Deficiencies in Internal Controls Request for Exemption to		N/A	N/A		Company	J	
55 56 57	Notification of Adverse Financial Condition Report of Significant Deficiencies in Internal Controls Request for Exemption to File	2	N/A N/A	N/A N/A				
55 56	Notification of Adverse Financial Condition Report of Significant Deficiencies in Internal Controls Request for Exemption to File Request to File	2	N/A	N/A			Not required	
55 56 57	Notification of Adverse Financial Condition Report of Significant Deficiencies in Internal Controls Request for Exemption to File Request to File Consolidated Audited	2	N/A N/A	N/A N/A			Not required for Foreign	
55 56 57	Notification of Adverse Financial Condition Report of Significant Deficiencies in Internal Controls Request for Exemption to File Request to File	2	N/A N/A	N/A N/A			Not required	

	STATE REQUI	RED FILINGS FOR THE STATE OF ARKANSAS ONLY
101	Filings Checklist	Required for Domestic Companies only. (With Column 1 completed)
102	Anti Fraud Assessment	http://www.insurance.arkansas.gov/Fraud/WEB%20PAGE%20-%20General%20Data.doc Due No later than June 30 th each year.
103	ARRUA Form	http://insurance.arkansas.gov/PandC/Datareports.htm Available on line Jan. 2006- Ark Rural Risk Underwriting Assessment Due Annually March 1st
104	AR166 REPORT	Form can be found at: http://insurance.arkansas.gov/PandC/Datareports.htm . The form is to be emailed to the attention of Nancy.Horton@arkansas.gov , then print the form and send in with the \$50.00 filing fee to the attention of Nancy Horton./Property & Casualty Division. Address in Note B- Due Annually May 1st .
105	Act 1345- County Fire Loss Annual Report	http://insurance.arkansas.gov/PandC/Datareports.htm The form is to be emailed to the attention of Becky.Harrington@arkansas.gov, as an Excel spreadsheet. Due Annually, June 1 st Contact Person: Becky Harrington, becky.harrington@arkansas.gov
106	Certificate of Deposit	See Note O below for Instructions- Due Annually March 1st
107	CHIP FORM	http://chiparkansas.org/insurers%2Donly/ Mandatory AR Comprehensive Health Ins Pool Form Due Annually March 1st
108	Consumer Credit & Credit Scoring Report	http://insurance.arkansas.gov/PandC/Datareports.htm The form is to be emailed as an Excesspreadsheet to Becky.Harrington@arkansas.gov. Due Annually March 31st Contact Person: Becky Harrington, becky.harrington@arkansas.gov
109	CFRF Form	http://insurance.arkansas.gov/Accounting/2006%20CFRF%20page.htm Company Financial Regulation Fee- Form will be available on-line March 15. Due Annually June 30 th.
110	Earthquake Market Analysis	http://insurance.arkansas.gov/PandC/Datareports.htm The form is to be emailed to Becky.Harrington@arkansas.gov. Due Annually April 1st Contact Person: Becky Harrington, becky.harrington@arkansas.gov
111	List of Premium Tax Forms & Due Dates	http://insurance.arkansas.gov/Accounting/2006%20LIST%20OF%20DUE%20DATES.doc Link to Filing Forms: http://insurance.arkansas.gov/Accounting/2006%20premium%20tax%20page.htm
112	Property & Casualty Guaranty Fund Form	http://insurance.arkansas.gov/Liquidation/divpage.htm Due Annually March 1st—Questions: 501-371-2776
113	Jurat/Attestation Form	Used for Foreign companies to indicate the Annual Financial Statement has been filed w the NAIC. Foreign companies: Do Not File this for Quarterly Statements. See Note L
114	Single State Ark Domestic Insurers Affiliated Transaction Disclosure Form	This form is for Domestics Only. http://insurance.arkansas.gov/Finance/financialstmthomepagefiles/SingleStateDomesticRegationForm3.doc Filed each Quarter with the Company 's financial statements.
115	State Filing Fees	All filings fees for certificate of authority renewal and annual statement filing fees are included on the premium tax forms. For additional questions, please contact the Accounting Division: 501-371-2605.

^{*}If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. **If Form Source is NAIC, the form should be obtained from the appropriate vendor.

	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:	Annette Craig, Finance Division Phone: 501-371-2673 Fax: 501-371-2747 Annette.craig@arkansas.gov
В	Mailing Address for Annual Statement filings:	Arkansas Insurance Department 1200 West Third Street Little Rock, AR. 72201-1904 ATTN: FINANCE DIVISION
С	Mailing Address for Premium Tax and Filing Fees:	ATTN: ACCOUNTING DIVISION Arkansas Insurance Department 1200 West Third Street Little Rock, AR. 72201-1904 Phone: 501-371-2605 Fax: 501-371-2618
D	Mailing Address for Premium Tax Payments:	ATTN: ACCOUNTING DIVISION Arkansas Insurance Department 1200 West Third Street Little Rock, AR. 72201-1904 Phone: 501-371-2605 Fax: 501-371-2618
Е	Delivery Instructions:	All filings must be physically received at the Department, no later than the indicated due date. If due date falls on weekend or federal holiday, due date is next business day.
F	Late Filings:	\$100 per day for late filings without an approved extension.
G	Original Signatures:	DOMESTIC: Original signatures required on all filings. FOREIGN: follow NAIC instructions.
Н	Signature/Notarization/Certification:	Two of 3 signatures are required on the Annual Statements. They must be signed by either of the following: President or Vice President with either the Secretary or Actuary.
I	Amended Filings: (Submit to address in Note B listed above) Remember to provide a newly signed jurat page with all amended filings.	Domestic Companies: File 2 copies of the amended items within 10 days of the amendments, including an explanation of the amendment. If there are signature requirements for the original filing; it should be followed for any amendment. Foreign Companies: Not required to file an amended jurat page indicating an amendment. We track these through the NAIC database.
J	Exceptions from normal filings: Submit requests for extensions/exemptions to: Leo Liu, Manager of Financial Analysis. Mailing address: See Note B	Foreign companies must supply a written copy from <i>state of domicile</i> of any exemption or extension at least 10 days prior to the filing date in order to receive either status from Arkansas. Domestic companies should apply at least <i>30 days prior to due date</i>
K	Bar Codes (State or NAIC)	Not required

L	Signed Jurat:	Foreign companies: This form
	Signed variation	to be sent separately to
		Arkansas <i>in lieu</i> of hard copy
		of Annual Financial Statement.
		This form is verification of
		submission of the Annual
		Financial Statement to the
		NAIC. Date received by the
		NAIC is considered the date
		submitted to the Arkansas
		Insurance Dept.
		Late fines based on the date
		received by the NAIC.
M	Quarterly Financial Statements	Not required by Foreign
11/1	(including Quarterly Jurat pages)	Companies.
	(including Quarterly sural pages)	Companies.
N	Independent CPA	Foreign insurers are not
11	independent of 11	required to notify this Dept.
		of this change.
0	Certificate of Deposit : Send under separate cover to:	Foreign Companies: Submit
	Malisa Landers, Securities Administrator	one original certificate of
	See Note B for mailing address	deposit from your state of
	Questions: 501-371-2679	domicile only.
	E-mail: Malisa.landers@arkansas.gov	donnene omy.
	Main Mandalandors & arkansas, gov	Domestics : Not required
Р	Fillings new, discontinued or modified materially since	Domostics. 110t required
1	last year.	
	1. Certificate of Valuation	No longer required.
	1. Certificate of Valuation	110 longer required.
	2. Certificate of Compliance	No longer required.
1		
-		

General Instructions For Companies to Use Checklist

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will send

mailing labels, and other information, to all companies but will not be sending their own checklist this year.

<u>Electronic filing is intended to include filing via the Internet or filing via diskette with the NAIC.</u> Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC.

Column (1) (Checklist)

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The *Annual Statement Electronic Filing* includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The *March .PDF Filing* is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The Risk-Based Capital Electronic Filing includes all risk-based capital data.

The Supplemental Electronic Filing includes all supplements due April 1, per the Annual Statement Instructions.

The Supplemental .PDF Filing is the .pdf file for all supplemental schedules and exhibits due April 1.

The Quarterly Statement Electronic Filing includes the complete quarterly statement data.

The *Quarterly Statement .PDF Filing* is the .pdf file for quarterly statement data.

The *Combined Annual Statement Electronic Filing* includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit.

The Combined Annual Statement .PDF Filing is the .pdf file for the Combined annual statement data and the combined Insurance Expense Exhibit.

The *June .PDF Filing* is the .pdf file for the Audited Financial Statements.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail. if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions. If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes <u>before</u> submitting a filing.